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REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) VERC0001	RECEIVED
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To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	In re Application of Thomas P. DONAHUE	
	Application No. 09/759,089	Filed 01/11/2004
	For: EMPLOYEE INTERNET MANAGEMENT DEVICE	
	Art Unit 2155	Examiner David V. Lazaro

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows (check time period desired):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>110.00</u>	\$ <u>55.00</u>	\$ <u>55.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>430.00</u>	\$ <u>215.00</u>	\$ <u>0</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>980.00</u>	\$ <u>490.00</u>	\$ <u>0</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,530.00</u>	\$ <u>765.00</u>	\$ <u>0</u>
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2,080.00</u>	\$ <u>1,040.00</u>	\$ <u>0</u>

- ☒ Applicant claims small entity status . See 37 CFR 1.27.
- ☒ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1123. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

- I am the
- ☐ applicant/inventor.
 - ☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
 - ☒ attorney or agent of record. Registration Number 33,940
 - ☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____

10/18/04
Date
(720) 406-5335
Telephone Number

Stuart T. Langley
SIGNATURE
Stuart T. Langley
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.